Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

405211	143004662
Study Area Code (SAC)	Service Provider Identification Number (SPIN) a certification form for each SAC through which it provides Lifeline service).
2016 Arkansas Arkansas	Southwestern Bell Telephone Company
Recertification Year State	ETC Name
AT&T Arkansas	AT&T Inc.
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes ⊠ No □
in accordance with Section 3(2) of the Communications Act. That S	r, using page 4 and additional sheets if necessary. Affiliation shall be determined ection defines "affiliate" as "a person that (directly or indirectly) owns or or control with, another person." 47 U.S.C. § 153(2). See also 47 C.F.R. §
Affiliated ETC's SAC	Affiliated ETC's Name
See page 4	See page 4
formation, or other similar legal document. An officer bylaws (or partnership agreement), and would typically	a position listed in the article of incorporation, articles of is a person who occupies a position specified in the corporate be president, vice president for operations, vice president for n. If the filer is a sole proprietorship, the owner must sign the
Section 1: Initial Certification All ETCs must comple	ete this section
I certify that the company listed above has certification	procedures in place to:
A) Review income and program-based eligibility docum	nentation prior to enrolling a consumer in the Lifeline program, and

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial RLH

Section 2: Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
2,110	106	128	211	1,665

Recertification Results:

F	G	$\mathbf{H} = (\mathbf{F} - \mathbf{G})$	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non- response or response of ineligibility from ETC recertification attempt
1,741	1,048	693	0	693

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above. Initial

AND/OR

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:	
(List database or name of administrator here) . Results are provided in the chart above in Blocks K through L.	I am an
officer of the company named above. I am authorized to make this certification for the SAC listed above.	
Initial	

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above. **Initial**

Section 3: De-enroll Percentage

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
1,741	693	39.80

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

ls t	he ETC	subject to	the non-usage	requirements?	Yes 🗆	No ⊠
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If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	
February	
March	
April	
May	
June	
July	
August	
September	
October	
November	
December	
Total Subscribers	

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.		
Signed, Rondd & Helyn Signature of Officer	Ronald L. Hilyer, Controller Printed Name and Title of Officer	
rh3168@att.com Email Address of Officer	<u>January 30, 2017</u> Date	
Stephen W Ellis Person Completing This Certification Form	510-628-8565 Contact Phone Number	

Affiliated ETCs

SAC	Name	
549004	AT&T CORP	
639005	AT&T MOBILITY PUERTO RICO, INC.	
259908	AT&T MOBILITY, LLC	
399015	AT&T MOBILITY, LLC	
529910	AT&T MOBILITY, LLC	
539010	AT&T MOBILITY, LLC	
215191	BELLSOUTH TELECOMMUNICATIONS, LLC	
225192	BELLSOUTH TELECOMMUNICATIONS, LLC	
235193	BELLSOUTH TELECOMMUNICATIONS, LLC	
245194	BELLSOUTH TELECOMMUNICATIONS, LLC	
255181	BELLSOUTH TELECOMMUNICATIONS, LLC	
265182	BELLSOUTH TELECOMMUNICATIONS, LLC	
275183	BELLSOUTH TELECOMMUNICATIONS, LLC	
285184	BELLSOUTH TELECOMMUNICATIONS, LLC	
295185	BELLSOUTH TELECOMMUNICATIONS, LLC	
345070	ILLINOIS BELL TELEPHONE COMPANY	
325080	INDIANA BELL TELEPHONE COMPANY, INC.	
315090	MICHIGAN BELL TELEPHONE COMPANY	
555173	NEVADA BELL TELEPHONE COMPANY	
209012	NEW CINGULAR WIRELESS PCS, LLC	
269905	NEW CINGULAR WIRELESS PCS, LLC	
279010	NEW CINGULAR WIRELESS PCS, LLC	
289912	NEW CINGULAR WIRELESS PCS, LLC	
319026	NEW CINGULAR WIRELESS PCS, LLC	
389015	NEW CINGULAR WIRELESS PCS, LLC	
409004	NEW CINGULAR WIRELESS PCS, LLC	
449022	NEW CINGULAR WIRELESS PCS, LLC	
479006	NEW CINGULAR WIRELESS PCS, LLC	
619004	NEW CINGULAR WIRELESS PCS, LLC	
545170	PACIFIC BELL TELEPHONE COMPANY	
415214	SOUTHWESTERN BELL TELEPHONE COMPANY	
425213	SOUTHWESTERN BELL TELEPHONE COMPANY	
435215	SOUTHWESTERN BELL TELEPHONE COMPANY	
445216	SOUTHWESTERN BELL TELEPHONE COMPANY	
305150	THE OHIO BELL TELEPHONE COMPANY	
335220	WISCONSIN BELL, INC.	